

**UTILITY
PATENT APPLICATION
TRANSMITTAL**

(only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	LFS-114
First Inventor	Leong et al.
Title	Biological Fluid Sampling and Analyte Measurement Devices and Methods
Express Mail Label No.	EL691440496US

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06/12/01
JC 978 U.S. PTO
06/07/97 146

APPLICATION ELEMENTS

See MPEP Chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17) *(submit an original and a duplicate for fee processing)*
2. Applicant claims small entity status.
3. Specification [Total Pages 29] *(Preferred arrangement set forth below)*
 - Descriptive Title of the Invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R&D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings *(if filed)*
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s)/35 USC 113) [Total Sheets1]
5. Oath or Declaration [Total Pages3]
 - a. Newly executed (original or copy)
 - b. Copy from a prior application (37 CFR 1.63(d)) *(for continuation/divisional with Box 18 completed)*
- i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76
18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-Part (CIP) of prior application No.:	, filed
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19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label **000027777** or Correspondence Address below

Name: Philip S. Johnson, Esq.
 Address: Johnson & Johnson
 One Johnson & Johnson Plaza
 New Brunswick, NJ 08933-7003 USA

20. TELEPHONE CONTACT

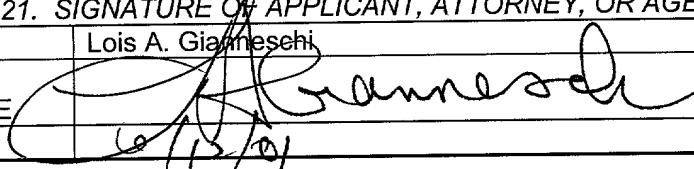
Please direct all telephone calls or telefaxes to Lois A. Gianneschi at:

Telephone: (732) 524-6351 Fax: (732) 524-2808

21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

NAME	Lois A. Gianneschi	Reg. No. 35519
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SIGNATURE



DATE

(07/13/01)

FEE TRANSMITTAL

Complete if Known	
Application Number	
Filing Date	June 12, 2001
First Named Inventor	Leong et al.
Group Art Unit	
Examiner Name	
Attorney Docket Number	LFS-114

FEE CALCULATION

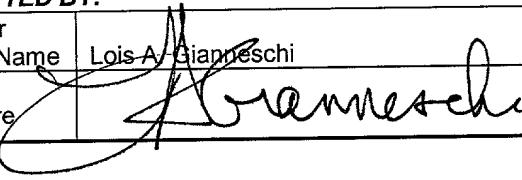
CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	55 - 20 =	35	x 18.00	\$ 630.00
INDEPENDENT CLAIMS	4 - 3 =	1	x 80.00	\$ 80.00
MULTIPLE DEPENDENT CLAIMS	<input type="checkbox"/>	N/A	\$270.00	
			TOTAL FEES	\$1,420.00

METHOD OF PAYMENT

Please charge Deposit Account No. 10-0750/LFS114/LG in the amount of \$1,420.00.
Three copies of this sheet are enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/LFS114/LG. Three copies of this sheet are enclosed.

SUBMITTED BY:		Complete (if applicable)
Typed or Printed Name	Lois A. Gianneschi	Reg. No. 35519
Signature		Date: 6/12/01
		Deposit Account No. 10-0750

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Leong et al.

For : Biological Fluid Sampling and Analyte Measurement
Devices and Methods

Express Mail Certificate

"Express Mail" mailing number: EL691440496US

Date of Deposit: June 12, 2001

I hereby certify that this complete application, including specification pages, claims, drawings, un-signed Declaration and Power of Attorney, and Information Disclosure Statement, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, Washington, D.C. 20231.

MARTIN Rizzi

(Typed or printed name of person mailing paper or fee)

Mart Rizzi

(Signature of person mailing paper or fee)